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Docket No. 663P

POWER OF ATTORNEY BY ASSIGNEE

Xoft microTube, Inc., the assignee of all interest in the patent application Serial No. 10/635,421 filed August 6, 2003, **TREATMENT OF AGE-RELATED MACULAR DEGENERATION**, hereby appoints

Thomas M. Freiburger
Registration No. 27,063

as its attorney to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, said appointment to be the exclusion of the inventor and his attorney in accordance with the provisions of 37 CFR Section 3.73(b).

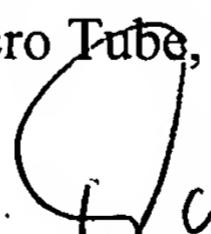
Documentary evidence of chain of title of the invention and application is in the form of an executed assignment from the inventor to the assignee identified below, a copy of which is included herewith and which has been submitted for recording in the Patent and Trademark Office.

As the assignee of all interest, I have reviewed the enclosed assignment and I certify that, to the best of my knowledge and belief, title to the invention and patent application is in the assignee as listed below.

Please direct all communications relative to said application to the following correspondence address:

Thomas M. Freiburger
PO Box 1026
Tiburon, California 94920
Telephone: 415-435-0240

Assignee:
Xoftmicro Tube, Inc.

By: 
Horst Adam
Title: President/CEO
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Fremont California 94538

Date: 12/23/03



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PAGE 02

Docket No. 663P

DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: **TREATMENT OF AGE-RELATED MACULAR DEGENERATION**, the specification of which was filed August 6, 2003, as application No. 10/635,421.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations. § 1.56(a).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor: Michael Forman

Inventor's Signature

Date: 12-24-03

Country of Citizenship: U.S.A.

Residence:

Los Gatos, California

Post Office Address:

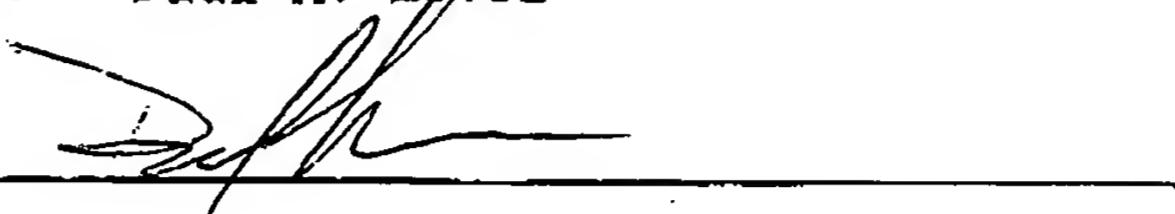
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PAGE 03

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Full name of third inventor: Peter C. Smith

Inventor's Signature 

Date: _____

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PAGE 01/01
PAGE 03

663P

Full name of second inventor: Michael Forman

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